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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>		Attorney Docket Number	3006-1783	
		First Named Inventor	Brian C. Case et al.	
		<i>COMPLETE IF KNOWN</i>		
		Application Number	10/551,399	
		Filing Date	September 29, 2005	
<input type="checkbox"/> Declaration Submitted With Initial Filing – Unsigned    OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge 37 CFR 1.16 (e) required)		Art Unit		
		Examiner Name		

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe that the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

PERCUTANEOUSLY DEPLOYED VASCULAR VALVES

*(Title of the Invention)*

The specification of which

☐ is attached hereto  
OR

☒ was filed on (MM/DD/YYYY) 04/01/2004 as United States Application Number or PCT International

Application Number PCT/US04/009971 and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation in-part-applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

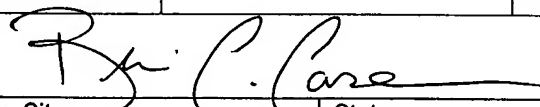
I hereby claim foreign priority benefits under 35 U.S.C. 119 (a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

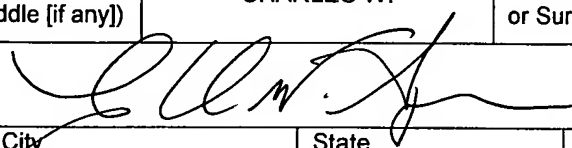
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
PCT/US2004/009971	PCT	04/1/2004	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

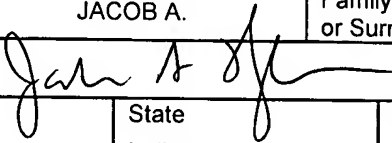
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under U35 USC 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/459,475	04/1/2003	

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number	<b>30565</b>	OR <input type="checkbox"/> Correspondence address below	
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle [if any])		BRIAN C.		Family Name or Surname	
				CASE	
Inventor's Signature				Date	
				July 12, 2006	
Residence: City		State		Country	
Bloomington		Indiana		US	
Mailing Address					
841 Rosewood Drive					
City		State		Country	
Bloomington		Indiana		US	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle [if any])		CHARLES W.		Family Name or Surname	
				AGNEW	
Inventor's Signature				Date	
Residence: City		State		Country	
West Lafayette		Indiana		US	
Mailing Address					
30 Steuben Court					
City		State		Country	
West Lafayette		Indiana		US	
<input checked="" type="checkbox"/> Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number	<b>30565</b>	OR <input type="checkbox"/> Correspondence address below	
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle [if any])		BRIAN C.		Family Name or Surname	
				CASE	
Inventor's Signature				Date	
Residence: City		State		Country	
Bloomington		Indiana		US	
Mailing Address					
841 Rosewood Drive					
City		State		ZIP	
Bloomington		Indiana		47404	
Country		US			
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle [if any])		CHARLES W.		Family Name or Surname	
				AGNEW	
Inventor's Signature 				Date <i>July 19, 2006</i>	
Residence: City		State		Country	
West Lafayette		Indiana		US	
Mailing Address					
30 Steuben Court					
City		State		ZIP	
West Lafayette		Indiana		47906	
Country		US			
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

<b>NAME OF JOINT INVENTOR, IF ANY:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle [if any]) JACOB A.		Family Name or Surname FLAGLE	
Inventor's Signature 		Date JULY 24, 2006	
Residence: City Indianapolis	State Indiana	Country US	Citizenship US
Mailing Address 4170 Bazil Avenue			
City Indianapolis	State Indiana	ZIP 46239	Country US

<b>NAME OF JOINT INVENTOR, IF ANY:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

<b>NAME OF JOINT INVENTOR, IF ANY:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor.	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country

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Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
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Mailing Address			
City	State	ZIP	Country